

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.:

09/532,352

Filing Date:

3/21/2000

Applicant:

KOGO ENDO

Technology Center 2600

RECEIVED

OCT 2 0 2003

Group Art Unit:

2684

Examiner:

Jean E. Lesperance

Title:

DISPLAY DEVICE AND ELECTRONIC APPARATUS

Attorney Docket:

9319S-000127

Director of The United States Patent and Trademark Office P.O. Box 1450 Alexandria, Virginia 22313-1450

AMENDMENT

Sir:

In response to the Office Action mailed August 13, 2003, please amend the application as follows and consider the remarks set forth below.

Amendments to the Claims begin on page 2 of this paper.

Remarks begin on page 14 of this paper.

10/14/2003 SMINASS1 00000033 09532352

01 FC:1202 02 FC:1201 54.00 OF

PTO/SB/17 (01-03) Se through 10/31/2002. OMB 0651-0032 Αρριοί e: U.S. DEPARTMENT OF COMMERCE U.S. Patent and Tradema

der the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2004

OCT 0 8 20b3

Complete if Known Application Number 09/532.352 3/21/2000 Filing Date **2 0** 2003 First Named Inventor Kogo Endo Examiner Name Jean E. lesperance Technology Center 2600 Group / Art Unit 2684

9319S-000127

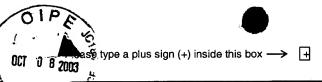
Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT 140

Patent fees are subject to annual revision.

Attorney Docket No. METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued) 3. ADDITIONAL FEES Check ☐ Credit card ☐ Money ☐ Other ☐ None Small Entity Large Entity □ Deposit Account: Fee Fee Fee Description Fee Paid Code (\$) Code (\$) Deposit 2051 Surcharge - late filing fee or oath 1051 130 65 08-0750 Account 1052 50 2052 25 Surcharge - late provisional filing fee Number or cover sheet. Deposit 1053 130 1053 130 Non-English specification Account Harness, Dickey & Pierce, P.L.C. 1812 2,520 1812 2,520 For filing a request for reexamination Name 1804 920* 1804 920 Requesting publication of SIR prior to Examiner action The Commissioner is authorized to: (check all that apply) ☐ Charge fee(s) indicated below ☐ Credit any overpayments 1805 1,840 1805 1,840* Requesting publication of SIR after Charge any additional fee(s) during the pendency of this application Examiner action ☐ Charge fee(s) indicated below, except for the filing fee 1251 110 2251 55 Extension for reply within first month to the above-identified deposit account. 1252 420 2252 210 Extension for reply within second **FEE CALCULATION** month 1253 950 2253 475 Extension for reply within third month BASIC FILING FEE 1254 1,480 2254 740 Extension for reply within fourth Large Entity **Small Entity** month Fee Fee Fee Description Fee Fee 1255 2.010 2255 1.005 Extension for reply within fifth month Fee Paid Code (\$) Code (\$) 1401 330 2401 165 Notice of Appeal Utility filing fee 1001 770 2001 385 1402 330 2402 165 Filing a brief in support of an appeal 1002 340 2002 170 Design filing fee 1403 290 2403 145 Request for oral hearing 1003 Plant filing fee 530 2003 265 Petition to institute a public use 1004 770 2004 385 Reissue filing fee 1451 1,510 1451 1,510 proceeding 2005 80 Provisional filling fee 1005 160 1452 110 2452 55 Petition to revive - unavoidable 1453 1,330 2453 665 Petition to revive - unintentional SUBTOTAL (1) (\$) 0 1501 1,330 2501 665 Utility issue fee (or reissue) 2. EXTRA CLAIM FEES 1502 480 2502 240 Design issue fee Extra Fee from Fee 1503 640 2503 320 Plant issue fee Paid Claims below 1460 130 Petitions to the Commissioner 1460 130 Total Claims 54 34 -31 18 1807 1807 50 Processing fee under 37 CFR 1.17 (q) ndependent 86 86 Submission of Information Disclosure 1806 180 1806 180 Multiple 0 Recording each patent assignment Dependent 8021 40 8021 per property (times number of 40 Large Entity **Small Entity** properties) 1809 770 2809 Filing a submission after final rejection 385 Fee Description Code (\$) Code (\$) (37 ČFR § 1.129(a)) 1202 18 2202 9 Claims in excess of 20 1810 770 2810 385 For each additional invention to be examined (37 CFR § 1.129(b)) 1201 2201 86 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid 1801 770 2801 385 Request for Continued Examination (RCE) ** Reissue independent claims over 1204 86 2204 43 1802 900 1802 900 Request for expedited examination original patent of a design application ** Reissue claims in excess of 20 and 1205 18 2205 over original patent Other fee (specify) SUBTOTAL (2) (\$) 140*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) O **or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		Complete (if applicable)			
	G. Gregory Schivley		27,382		
Name (Print/Type)	Bryant E. Wade	Registration No. Allomey/Agent)	40,344	Telephone	(248) 641-1600
Signature	Sind .	alada		Date	October

included on this form. Provide credit card information and authorization on PTO-2038.



TRANSMITTAL

	Application Number	09/532,352	DECEME
	Filing Date	3/21/2000	RECEIVED
	First Named Inventor	Kogo Endo	OCT 2 0 2003
)	Group Art Unit	2684	Technology Center 260
	Examiner Name	Jean E. Lespe	erance
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FORM (to be used for all correspondence after initial filing)			Named Inventor	Kogo E	indo	OCT	OCT 2 0 20	200	
			Art Unit	2684 Techr			w Cc	nta	
			Examiner Name Jean E. Lesperance				ogy Cente		
Total Number of Pages in This Submission			ey Docket Number	9319S-000127				フ	
	ENCLO	OSURES	(check all that apply)						
Fee Transmittal Form		nment Papers Application)		After Allowance Communication to Group					
Fee Attached	☐ Drawin	Drawing(s)		Appeal Communication to Board of Appeals and Interferences					
Amendment / Response	Licensing-related Papers		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)						
After Final	Petition		Proprietary Information						
Affidavits/declaration(s)		Petition to Convert to a Provisional Application			Status Letter				
			ey, Revocation espondence Address	Other Enclosure(s) (please identify below):					
Express Abandonment Request		☐ Terminal Disclaimer ☐ Request for Refund							
☐ Information Disclosure Statement	CD, Nu	CD, Number of CD(s)							
Certified Copy of Priority Document(s)	Rema	Remarks							
Response to Missing Parts/ Incomplete Application									
Response to Missing Parts under 37 CFR 1.52 or 1.53									
SIGNA	ATURE OF	APPLIC	ANT, ATTORNEY, C	R AGEN	T				
Firm or Individual name Harness, Dickey & Pierce, P.L.C		ر G.	Attorney Name G. Gregory Schively Bryant E. Wade		Reg. No. 27,382 40,344				
Signature	5. W	la f	_						
Date October Z	, 2003								
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I hereby certify that this correspondence addressed to: Director of the U.S. Pa transmitted to the U.S. Patent and Trade	tent and Trac	demark (Office, P.O. Box 1450	tal Service , Alexandri	as first class ma ia, VA 22313-14	il in an ei 150, or f	nvelop acsimi	ə le	
Typed or printed name G. Gregory S			= Wade		****			一	
Signature	4/ h	Stel	of e	Date	October	~ , 20	03	ナ	